

Please type a plus sign (+) inside this box [+]

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL
(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 42390P12376
(maximum 12 characters)

First Named Inventor Randy P Stanley

Title: A METHOD AND APPARATUS TO PROVIDE A USER PRIORITY MODE

Express Mail Label No. EL627 534 362US

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D. C. 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. **Fee Transmittal Form (e.g., PTO/SB/17)**
(Submit an original, and a duplicate for fee processing)
2. **Applicant Claims Small Entity Status. (37 CFR 1.27)**
3. **Specification (Total Pages 30)**
(preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference sequence listing, a table,
or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. **Drawings(s) (35 USC 113) (Total Sheets 4)**
5. **Oath or Declaration (Total Pages 5)**
 - a. Newly Executed (Original or Copy)
 - b. Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed)
 - i. **DELETIONS OF INVENTOR(S)** Signed statement attached deleting
inventor(s) named in the prior application, see 37 CFR 1.63(d)(2)
and 1.33(b).
 - c. Unsigned.
6. **Application Data Sheet. (37 CFR 1.76)**
7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. _____ **Assignment Papers (cover sheet & documents(s))**
10. _____ a. Separate 37 CFR 3.73(b) Statement (where there is an assignee)
_____ b. Power of Attorney
11. _____ English Translation Document (if applicable)
12. _____ a. Information Disclosure Statement (IDS)/PTO-1449
_____ b. Copies of IDS Citations
13. _____ **Preliminary Amendment**
14. **Return Receipt Postcard (MPEP 503) (Should be specifically itemized)**
15. _____ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. _____ **Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.**
17. _____ Other: _____

18A. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP)
Of Prior Application No.: _____ **Examiner** _____ **Group Art Unit** _____
(which is a continuation/ divisional/ CIP of prior application no. _____,
which is a continuation/ divisional/ CIP of prior application no. _____) (List entire chain of priority)

Applicant(s): Also include a Preliminary Amendment to amend the specification to claim priority.
For CONTINUATION AND DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18B. Statement under 37 CFR 3.73(b) for continuing application:

The undersigned states that _____ (name of assignee) is the assignee of the entire right, title, and interest in the accompanying patent application by virtue of an assignment recorded in the Patent and Trademark Office at Reel. No. _____ Frame No. _____ (or a copy of which is attached).

19. Correspondence Address

Customer Number or Bar Code Label _____
or _____ (Insert Customer No. or Attach Bar Code Label here)

Correspondence Address Below

NAME Thomas S. Ferrill

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

ADDRESS 12400 Wilshire Boulevard

Seventh Floor

CITY Los Angeles STATE California ZIP CODE 90025-1026

Country U.S.A. TELEPHONE (408) 720-8300 FAX (408) 720-9397

Name (PRINT/TYPE): Thomas S. Ferrill

Registration No.: 42,532

Signature: Thomas S. Ferrill

Date: 9-25-01

FEE TRANSMITTAL FOR FY 2001TOTAL AMOUNT OF PAYMENT (\$) 1032.00

Complete if Known:

Application No. Not Yet AssignedFiling Date 09/25/01First Named Inventor Randy P StanleyGroup Art Unit Not Yet AssignedExaminer Name Not Yet AssignedAttorney Docket No. 42390P12376**METHOD OF PAYMENT** (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666

Deposit Account Name _____

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed: Check
 Credit Card
 Money Order
 Other

FEE CALCULATION**1. BASIC FILING FEE**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
Fee	Fee	Fee	Fee		
Code	(\$)	Code	(\$)		
101	710	201	355	Utility application filing fee	<u>710.00</u>
106	320	206	160	Design application filing fee	_____
107	490	207	245	Plant filing fee	_____
108	710	208	355	Reissue filing fee	_____
114	150	214	75	Provisional application filing fee	_____

SUBTOTAL (1) \$ 710.00**2. EXTRA CLAIM FEES**

		<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims	<u>29</u>	- 20** = <u>9</u>	X <u>18</u>	= <u>162.00</u>
Independent Claims	<u>5</u>	- 3** = <u>2</u>	X <u>80</u>	= <u>160.00</u>
Multiple Dependent				= _____

**Or number previously paid, if greater; For Reissues, see below.

Large Entity Small Entity

		<u>Fee Description</u>
Fee	Fee	
Code	(\$)	Code
103	18	203 9
102	80	202 40
104	270	204 135
109	80	209 40
110	18	210 9

Claims in excess of 20

Independent claims in excess of 3

Multiple dependent claim, if not paid

**Reissue independent claims over original patent

**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 322.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee Code	Fee (\$)	Fee Code (\$)	
105	130	205	Surcharge - late filing fee or oath
127	50	227	Surcharge - late provisional filing fee or cover sheet
139	130	139	Non-English specification
147	2,520	147	For filing a request for ex parte reexamination
112	920*	112	Requesting publication of SIR prior to Examiner action
113	1,840*	113	Requesting publication of SIR after Examiner action
115	110	215	Extension for reply within first month
116	390	216	Extension for reply within second month
117	890	217	Extension for reply within third month
118	1,390	218	Extension for reply within fourth month
128	1,890	228	Extension for reply within fifth month
119	310	219	Notice of Appeal
120	310	220	Filing a brief in support of an appeal
121	270	221	Request for oral hearing
138	1,510	138	Petition to institute a public use proceeding
140	110	240	Petition to revive – unavoidable
141	1,240	241	Petition to revive - unintentional
142	1,240	242	Utility issue fee (or reissue)
143	440	243	Design issue fee
144	600	244	Plant issue fee
122	130	122	Petitions to the Commissioner
123	50	123	Processing fee under 37 CFR 1.17(q)
126	180	126	Submission of Information Disclosure Stmt
581	40	581	Recording each patent assignment per property (times number of properties)
146	710	246	For filing a submission after final rejection (see 37 CFR 1.129(a))
149	710	249	For each additional invention to be examined (see 37 CFR 1.129(b))
179	710	279	Request for Continued Examination (RCE)
169	900	169	Request for expedited examination of a design application
195	300	195	Publication fee for early, voluntary, or normal publication
196	300	196	Publication fee for republication
194	130	194	Request for voluntary publication or republication
098	130	098	Processing fee under 37 CFR 1.17(i)
091	1,240	091	Acceptance of unintentionally delayed claim for priority

Other fee (specify) _____

Other fee (specify) _____

SUBTOTAL (3) \$ 0.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Thomas S. Ferrill

Signature: Thomas S. Ferrill Date: 9-25-01

Reg. Number: 42,532 Telephone Number: 408 720-8300

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

EXPRESS MAIL CERTIFICATE OF MAILING

"Express Mail" mailing label number: EL627 534 362US

Date of Deposit: 09/25/01

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

Michelle Offenbaker

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)

Michelle Offenbaker
9/25/01

(Date signed)

Serial/Patent No.: **** Filing/Issue Date: Herewith

Client: Intel Corporation

Title: A Method and Apparatus to Provide A User Priority Mode

BSTZ File No.: 42390P12376

Atty/Secty Initials: TSF/mro

Date Mailed: 09/25/2001

Docket Due Date: ****

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | |
|--|--|
| <input type="checkbox"/> Amendment/Response (____ pgs.) | <input checked="" type="checkbox"/> Express Mail No.: <u>EL627534362</u> <input checked="" type="checkbox"/> Check No. <u>45481</u> |
| <input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate) | <input type="checkbox"/> _____ Month(s) Extension of Time <input type="checkbox"/> Amt: <u>\$ 1032.00</u> |
| <input checked="" type="checkbox"/> Application - Utility (<u>30</u> pgs., with cover and abstract) | <input type="checkbox"/> Information Disclosure Statement & PTO-149 (____ pgs.) <input type="checkbox"/> Check No. _____
<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Petition for Extension of Time
<input type="checkbox"/> Petition for _____
<input checked="" type="checkbox"/> Postcard
<input type="checkbox"/> Power of Attorney (____ pgs.)
<input type="checkbox"/> Preliminary Amendment (____ pgs.)
<input type="checkbox"/> Reply Brief (____ pgs.)
<input type="checkbox"/> Response to Notice of Missing Parts
<input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business
<input checked="" type="checkbox"/> Transmittal Letter, in duplicate
<input checked="" type="checkbox"/> Fee Transmittal, in duplicate |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.) | |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.) | |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.) | |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.) | |
| <input type="checkbox"/> Application - Design (____ pgs.) | |
| <input type="checkbox"/> Application - PCT (____ pgs.) | |
| <input type="checkbox"/> Application - Provisional (____ pgs.) | |
| <input type="checkbox"/> Assignment and Cover Sheet | |
| <input checked="" type="checkbox"/> Certificate of Mailing (<u>with postcard copy</u>) | |
| <input checked="" type="checkbox"/> Declaration & POA (<u>5</u> pgs.) (<u>unsigned</u>) | |
| <input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor Signature (____ pg.) | |
| <input checked="" type="checkbox"/> Drawings: <u>4</u> # of sheets includes <u>4</u> figures | |
| <input type="checkbox"/> Other: _____ | |